



Complete Summary

TITLE

End stage renal disease (ESRD): percentage of adult patients whose arterial venous (AV) graft was routinely monitored (screened) for the presence of stenosis during the study period.

SOURCE(S)

Centers for Medicare & Medicaid Services. 2004 Annual Report, End Stage Renal Disease Clinical Performance Measures project. Baltimore (MD): Centers for Medicare & Medicaid Services, Center for Beneficiary Choices; 2004 Dec. 100 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of adult patients whose arterial venous (AV) graft was routinely monitored (screened) for the presence of stenosis during the study period by one of the following methods and with the stated frequency: Color-flow Doppler at least once every 3 months; Static venous pressure at least once every 2 weeks; Dynamic venous pressure every hemodialysis (HD) session; Dilution technique at least once every 3 months.

RATIONALE

The ESRD Clinical Performance Measures (CPM) Project is a national effort led by the Centers for Medicare & Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA), and its eighteen ESRD Networks to assist dialysis providers to improve patient care and outcomes.

The purpose of the ESRD CPM Project is to provide comparative data to ESRD caregivers to assist them in assessing and improving the care provided to dialysis patients.

While significant improvements in care have occurred, the opportunities to improve care for dialysis patients in the U.S. in the areas of adequacy of dialysis, vascular access, and anemia management continue.

PRIMARY CLINICAL COMPONENT

End stage renal disease (ESRD); hemodialysis (HD); vascular access; arterial venous (AV) graft; monitoring for stenosis

DENOMINATOR DESCRIPTION

All adult (greater than or equal to 18 years old) patients in the sample for analysis who were on hemodialysis (HD) continuously during the study period and who were dialyzed through an arterial venous (AV) graft during their last HD session during the study period

NUMERATOR DESCRIPTION

Number of patients in the denominator whose arterial venous (AV) graft was routinely monitored (screened) for the presence of stenosis during the study period* by one of the following methods and with the stated frequency: Color-flow Doppler at least once every 3 months; Static venous pressure at least once every 2 weeks; Dynamic venous pressure every hemodialysis (HD) session; Dilution technique at least once every 3 months

*The most recent data collected for the End Stage Renal Disease (ESRD) Clinical Performance Measures (CPM) Project were for the 3 month time period (October - December 2003) for the in-center HD patients. However, facilities implementing this measure may choose any time period.

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

External oversight/Medicare
Internal quality improvement
National reporting

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

The incidence of treated end stage renal disease (ESRD) in the United States is 333 per million population. As of December 31, 2003, there were 310,095 patients receiving dialysis therapy in the United States.

EVIDENCE FOR INCIDENCE/PREVALENCE

Centers for Medicare & Medicaid Services. 2004 Annual Report, End Stage Renal Disease Clinical Performance Measures project. Baltimore (MD): Centers for Medicare & Medicaid Services, Center for Beneficiary Choices; 2004 Dec. 100 p.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All adult (greater than or equal to 18 years old) patients in the sample for analysis who were on hemodialysis (HD) continuously during the study period and who were dialyzed through an arterial venous (AV) graft during their last HD session during the study period

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All adult (greater than or equal to 18 years old) patients in the sample for analysis who were on hemodialysis (HD) continuously during the study period and who were dialyzed through an arterial venous (AV) graft during their last HD session during the study period

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition

Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patients in the denominator whose arterial venous (AV) graft was routinely monitored (screened) for the presence of stenosis during the study period* by one of the following methods and with the stated frequency: Color-flow Doppler at least once every 3 months; Static venous pressure at least once every 2 weeks; Dynamic venous pressure every hemodialysis (HD) session; Dilution technique at least once every 3 months

*The most recent data collected for the End Stage Renal Disease (ESRD) Clinical Performance Measures (CPM) Project were for the 3 month time period (October - December 2003) for the in-center HD patients. However, facilities implementing this measure may choose any time period.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Vascular access CPM III: monitoring arterial venous grafts for stenosis.

MEASURE COLLECTION

[ESRD Clinical Performance Measures](#)

MEASURE SET NAME

[Vascular Access](#)

DEVELOPER

Centers for Medicare & Medicaid Services

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

1999 Dec

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Centers for Medicare & Medicaid Services. 2004 Annual Report, End Stage Renal Disease Clinical Performance Measures project. Baltimore (MD): Centers for Medicare & Medicaid Services, Center for Beneficiary Choices; 2004 Dec. 100 p.

MEASURE AVAILABILITY

The individual measure, "Vascular Access CPM III: Monitoring Arterial Venous Grafts for Stenosis," is published in "2004 Annual Report, End Stage Renal Disease Clinical Performance Measures Project." This document is available in Portable Document Format (PDF) from the [Centers for Medicare and Medicaid Services \(CMS\) Web site](#).

For more information, refer to the CMS Web site at, www.cms.hhs.gov.

NQMC STATUS

This NQMC summary was completed by ECRI on July 15, 2005. The information was verified by the measure developer on August 9, 2005.

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The logo for FIRSTGOV, with "FIRST" in blue and "GOV" in red, and a small red star above the "I".

